

NOTICE OF DUTY TO RESOLVE LIEN DISPUTE

DATE OF NOTICE: January 17, 2023

I. SETTLEMENT CLASS MEMBER INFORMATION

Settlement Program ID	100007249		
Name	First Harlan	M.I.	Last Huckleby
Settlement Class Member Type	Retired NFL Football Player		
Primary Counsel	Byron Cuthbert and Associates, LLC		
Address	Street 1143 Cameron Creek		
	City Marietta	State Georgia	Zip 30062

II. LIEN INFORMATION

Lien Type	Attorney Lien		
Lienholder	Locks Law Firm		
Address:	Street 170 S. Independence Mall West, Suite 720 East		
	City Philadelphia	State PA	Zip 19106
Lien Amount	22% of any Monetary Award	As of 1/17/2023	
Date Received	5/6/2020		

III. PURPOSE OF THIS NOTICE

This Notice is an official communication from the Claims Administrator for the NFL Concussion Settlement Program. The Settlement Class Member identified in Section I disputes the Lien described in Section II or failed to respond to the Notice of Lien.

We will not participate in Lien disputes.

IV. PAYMENT OF LIEN

We will withhold the Lien Amount from any Monetary Award or Derivative Claimant Award otherwise due to the Settlement Class Member, to the extent there are sufficient funds available, until the dispute is resolved.



Attorneys' Liens: If the Settlement Class Member disputes or fails to consent to an Attorney's Lien pursuant to the Court's April 4, 2017 Order, we refer the dispute to the Magistrate Judge. We withhold an amount sufficient to satisfy the Lien and the fees and costs of the Settlement Class Member's current attorney, to the extent funds are available, until we receive either (1) Court approval of the Withdrawal of Attorney's Lien Dispute forms (attached to this Notice) signed by both the Settlement Class Member and the Attorney Lienholder specifying the distribution of the withheld funds; or (2) a copy of a final decision from the Court determining the amount, if any, to be paid to the Attorney Lienholder. We will pay the Settlement Class Member and/or the Attorney Lienholder according to the Withdrawal or the Court's final decision.

Child Support Liens, Tax Liens, and Judgment Liens: If the Settlement Class Member disputes or fails to consent to a Child Support Lien, Tax Lien, or Judgment Lien, we withhold an amount sufficient to satisfy the Lien, to the extent funds are available, until we receive either (1) notice of satisfaction and discharge of the Lien from the lienholder; (2) a written agreement signed by both the Settlement Class Member and the lienholder specifying the distribution of the withheld funds; or (3) a copy of a final decision from the applicable federal or state agency or court determining the amount, if any, to be paid to the lienholder. If we receive a notice of satisfaction and discharge of the Lien, we will pay the entire withheld amount to the Settlement Class Member. If we receive a written agreement or a copy of a final decision from the applicable federal or state agency or court, we will pay the Settlement Class Member and/or the lienholder according to the terms of the agreement or final decision.

V. HOW TO RESPOND TO THIS NOTICE

Submit any resolution documentation to the Claims Administrator using one of these methods:

By Email:	ClaimsAdministrator@NFLConcussionSettlement.com
By Mail:	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260 ATTN: NFL Liens
By Delivery:	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231 ATTN: NFL Liens

If you are the Settlement Class Member and would like to receive and submit forms like this one electronically online rather than on paper, go to www.NFLConcussionSettlement.com/Login.aspx, click the Create New User button and follow the instructions there to establish a secure online portal account with us.

VI. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP

If you have any questions about this Notice or need help, call us at 1-855-887-3485 or email ClaimsAdministrator@NFLConcussionSettlement.com.



NFL**CONCUSSION SETTLEMENT**IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)**WITHDRAWAL OF ATTORNEY'S LIEN DISPUTE**

This Withdrawal Form ("Withdrawal") must be submitted to the Claims Administrator if the Parties to an Attorney's Lien Dispute reach an agreement resolving the Dispute at any time before the Magistrate Judge issues a Report and Recommendation or a final decision. Each Party to a Dispute must submit a Withdrawal that includes:

1. The agreed amount or percentage allocation of the Monetary Award funds withheld for attorneys' fees to be paid to each Party;
2. Any costs of the current attorney as reflected in the Statement of Fees and Costs with an itemized list of those costs including a brief explanation of the purpose of incurring the costs and the date the costs were incurred;
3. Any costs of the attorney lienholder(s) as set forth in the Lien assertion(s) with an itemized list of those costs including a brief explanation of the purpose of incurring the costs and the date the costs were incurred;
4. The allocation of a refund, if any, of the 5% deduction for Common Benefit Fees among the Parties.

The Withdrawal must be approved by the Court.

I. SETTLEMENT CLASS MEMBER INFORMATION

Name	First	M.I.	Last
Settlement Class Member Type			
Primary Counsel in the Settlement Program			
Address	Street		
	City	State	Zip
Email Address			

II. ATTORNEY LIENHOLDER INFORMATION (#1)

Name	Full Name or Law Firm Name		
Address	Street		
	City	State	Zip
Email Address			

III. ATTORNEY LIENHOLDER INFORMATION (#2) (IF APPLICABLE)

Name	Full Name or Law Firm Name		
Address	Street		
	City	State	Zip
Email Address			

IV. SUMMARY OF DISPUTE RESOLUTION

The Parties to the Dispute must complete the boxes below to reflect the amounts to be distributed to the Settlement Class Member or his or her attorney (if represented) and to the Attorney Lienholder(s). The total fees cannot exceed the Presumptive Fee Cap unless the Court granted a Petition for Deviation.

A. ATTORNEYS' FEES AND COSTS

		Amount or Percentage of Fees	Amount of Reasonable Costs**
1.	To be Paid to Attorney Lienholder #1		
2.	To be Paid to Attorney Lienholder #2		
3.	To be Paid to Settlement Class Member or his or her Attorney Identified in Section I		

**** Costs for the current attorney or Attorney Lienholder(s) must have been provided to the Claims Administrator in the Statement of Fees and Costs and the Lien assertion(s), respectively. Each attorney must attach to this Withdrawal an itemized list of costs with a brief description of each cost and the date each cost was incurred.**

B. COMMON BENEFIT FEE REFUND

The Claims Administrator is obligated to pay 5% of all Awards into the Attorneys' Fees Qualified Settlement Fund pending further order of the Court. Explain how the Parties wish to distribute those funds or a portion thereof, if they are refunded by the Court at a future date.

1.	Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Attorney Lienholder #1	
2.	Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Attorney Lienholder #2	
3.	Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Settlement Class Member	
4.	Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Settlement Class Member's Attorney Identified in Section I	

Note: It is understood that the Claims Administrator will pay the Parties these amounts according to the provisions of the Settlement Agreement and Court orders regarding settlement implementation.

V. HOW TO SERVE THIS WITHDRAWAL ON THE CLAIMS ADMINISTRATOR

By Email	ClaimsAdministrator@NFLConcussionSettlement.com
By Facsimile	(804) 521-7299; ATTN: NFL Liens
By Mail	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260 ATTN: NFL Liens
By Delivery	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231 ATTN: NFL Liens

VI. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP

Settlement Class Member: If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions or need help, contact us at 1-855-887-3485 or send an email to ClaimsAdministrator@NFLConcussionSettlement.com. If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.

Lienholder: Contact us at 1-855-877-3485 or email ClaimsAdministrator@NFLConcussionSettlement.com. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.

VII. SIGNATURE

Both the Settlement Class Member or his or her attorney, if represented, and Attorney Lienholder(s) must submit a signed copy of this Withdrawal to the Claims Administrator. By signing this Withdrawal, each Party certifies the following:

I declare under penalty of perjury pursuant to 28 U.S.C. § 1746 that the information provided in this Withdrawal is true and accurate to the best of my knowledge and that I understand that false statements made in connection with this process may result in fines, sanctions, and/or other remedy available by law.

I certify that I have/will serve a copy of this signed Withdrawal on the Claims Administrator.

By submitting this Withdrawal, I consent to the payment of the withheld funds according to the terms in Section IV.

Signature		Date	
Printed Name	First	Middle Initial	Last
Law Firm			